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**REQUEST FOR WITHDRAWAL  
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Application Number	09/761,421
Filing Date	
First Named Inventor	Robert L. Jones
Art Unit	
Examiner Name	
Attorney Docket Number	

AUG 21 2006

**To: Commissioner for Patents**  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
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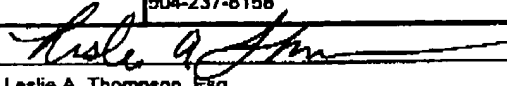
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<input checked="" type="checkbox"/> Firm or Individual Name	Robert L. Jones		
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